

Entered -11-02-00 - sb  
CL 00L0672 - GWENDOLYN BURNS

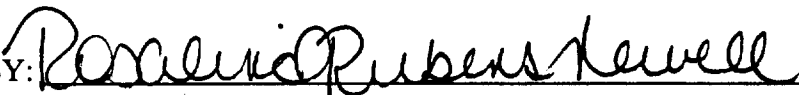
CLAIM OF:

01-12 -1419

JOE A. CRUZ, JR.  
640 Webster Drive, #A  
Decatur, Georgia 30033

For vehicular damages alleged to have been sustained from driving  
over a displaced manhole cover on October 19, 2000 at 813 North  
Avenue.

THIS ADVERSED REPORT IS  
APPROVED

BY:   
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0672

Date: August 31, 2001

Claimant /Victim JOE A. CRUZ JR.  
BY: (Atty) (Ins. Co.) \_\_\_\_\_  
Address: 640 Webster Drive, #A, Decatur, Georgia 30033  
Subrogation: Claim for Property damage \$ 675.99 Bodily Injury \$ \_\_\_\_\_  
Date of Notice: 10/31/00 Method: Written, Proper X Improper \_\_\_\_\_  
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X  
Date of Occurrence 10/19/00 Place: 813 North Avenue  
Department PUBLIC WORKS Division Sewer Operations  
Employee involved \_\_\_\_\_ Disciplinary Action: \_\_\_\_\_

NATURE OF CLAIM: Claimant alleges that he sustained vehicular damages when he drove over a displaced manhole cover in the roadway. However, an investigation determined that the City did not have notice of this condition prior to claimant's incident.

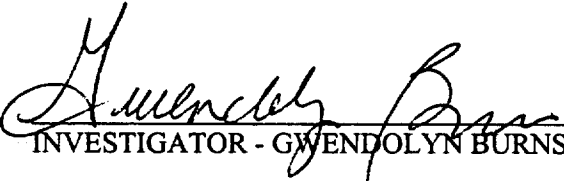
INVESTIGATION:

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others \_\_\_\_\_ Written \_\_\_\_\_ Oral \_\_\_\_\_  
Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police \_\_\_\_\_ Dept Report X Other X  
Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_  
Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

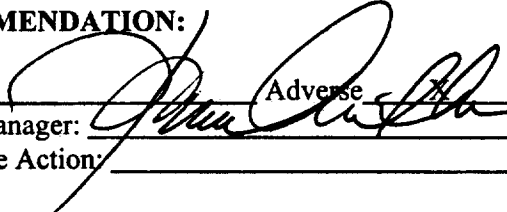
BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial \_\_\_\_\_  
Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other X Damages reasonable \_\_\_\_\_  
City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_  
Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_  
Claimant Negligent \_\_\_\_\_ City Negligent \_\_\_\_\_ Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ \_\_\_\_\_ Adverse X Account charged: 1A01 \_\_\_\_\_ 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_  
Claims Manager:  Concur/date 08-30-01  
Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

BURNS  
11/02/00  
Don

COUNCIL OF THE CITY OF ATLANTA  
CLERK OF COUNCIL  
City Hall  
55 Trinity Avenue, S.W.  
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: 10-27-00

Dear Clerk of Council:

ENTERED - 11-2-00 - SB  
00L0672 - GWEN BURNS

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 675.99 property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 10-19-00  
(month/day/year)
2. Police called: X Yes No CASE # 002980644
3. Location of incident: NORTH AVE. NE BETWEEN BONAVENTURE AND FREEDOM PKWY
4. Name of your insurance company: ALL STATE Policy No. 1-10-060653
5. State what and how incident occurred: ON THURSDAY, OCTOBER 19, 2000, AT 1:20AM, I STRUCK A DISPLACED MANHOLE COVER ON NORTH AVE. NE BETWEEN BONAVENTURE AVE AND FREEDOM PKWY. ALL I SAW WAS THE UNCOVERED MANHOLE. ONLY AFTER WALKING BACK TO THE ACCIDENT SITE DID I SEE THE MANHOLE COVER. THE ROAD WAS POORLY LIT AND FRESHLY PAVED BLACK.
6. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

7. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: VOLVO 1998 845-XF2 JOSE ANTONIO CRUZ JR.  
(make) (year) (tag number) (driver's name)

City vehicle: \_\_\_\_\_  
(make) (City driver's name) (department/bureau)

8. Witness: NONE  
(name) (address) (telephone number)

9. The acknowledgement of this claim in no way waives the Governmental immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

10. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Joe A. Cruz Jr.  
(claimant's name)

640 WEBSTER DR #B  
(address)

DECATUR, GA 30033  
(city and state)

404-846-5178 404-636-7095  
(work number) (home number)

01- P.-1419